AMENDME						
SERIAL NO: 09/229,229	FILING DATE: 1/12/99	EXAMINER: A. Hollera	n/	CROUP ART UNIT: 1642 CONFIRMATION NO.: 7340		
INVENTION:	COMPOSITIONS A		FOR	TREATING CELLS HAVING		

PE JC/O

Expenses group grant to the test of the first of

TO: COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

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(TYPED OR PRINTED NAME OF PERSON MAILING PAPER OR FEE)
(SIGNATURE OF PERSON MAILING PAPER OR FEE)

Transmitted herewith is a Response to the Office Action mailed June 10, 2003, in the above-identified application.

- X Small Entity status of this application has been established under 37 CFR 1.27.
- X Exhibits A-E.
- Petition for Extension of Time is enclosed (in duplicate).
- ____ Terminal Disclaimer with fee under 37 C.F.R. 1.20(d) is enclosed.
- X No additional claims fee is required.
- An additional claims fee is required and has been calculated as shown below:

CLAIMS AS AMENDED

				#11	NO AD ANEI	100				· · · · · · · · · · · · · · · · · · ·		
	NUMBER AFTER	1	HIGHEST NUMBER		NUMBER OF EXTRA		RA	ATE		FEE		
	AMEND- MENT		PREVIOUSLY PAID FOR		CLAIMS PRESENTED		SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY	
TOTAL CLAIMS	20	-	22	-	0	х	\$9	\$18	=	\$0.00	\$	
INDEPEN- DENT CLAIMS	1	-	3	-	0	х	\$42	\$84	=	\$0.00	\$	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			YES	_	XX_NO		\$140	\$280	=	\$0.00	\$	
						TOTAL ADDITIONAL FEE			\$0.00	\$		

- If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
- ** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
- *** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.

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